

NOTICE TO COMPLY OR QUIT FOR MATERIAL HEALTH / SAFETY VIOLATION

To: _____
(Tenant's Name)

(Rental Unit Street Address)

(Rental Unit City/State/Zip)

You (tenant) have caused/allowed the following health/safety violations:

If you do not correct the violation(s) by _____ (date), your tenancy will be terminated, and you will be required to move out of the rental unit. In addition, a lawsuit may be filed against you.

If you correct the violation(s) noted above by the deadline, you will not have to move.

Today's Date: _____

Signature of party completing this notice:

Printed Name and Title (i.e. landlord, property manager, etc.):

.....

Tenant's Acknowledgement

On _____ (date) at _____ (time), tenant acknowledged receipt of this notice.

Tenant Signature and Date

.....

Certificate of Service

☐ I certify that I personally served this notice on the following person:

OR

☐ I attempted to make personal service on the tenant(s) named above but no one appeared. I believed tenant(s) to be absent, so I left a copy of the notice with someone of suitable age and discretion AND mailed a copy of the notice to the tenant.

OR

☐ I attempted to make personal service on the tenant(s) named above but the tenant did not appear. I believed tenant(s) to be absent, so I posted the notice in a conspicuous place at the rental unit AND mailed a copy of the notice to the tenant.

Date: _____

Signature of person attempting service:

Printed Name:
